

Aug. 2004 18:01

46 8 661 6368 Diamyd

No.0256 P. 4

PTO/SB/81 (05-04)

Approved for use through 11/30/2005. OMB 0551-0036

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and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10804845
Filing Date	03/19/2004
First Named Inventor	Robert Harris
Title	IMMUNOMODULATION BY A...
Art Unit	
Examiner Name	
Attorney Docket Number	DIA1809-005B

I hereby appoint:



Practitioners associated with the Customer Number:

045684

OR



Practitioner(s) named below:

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I am the:



Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98)**SIGNATURE of Applicant or Assignee of Record** (if assignee, put name, title and company name in the "Name" space below)

Name	Robert Harris
Signature	<i>Robert Harris</i>
Date	July 28 - 2004
Telephone	46-8-661-0026

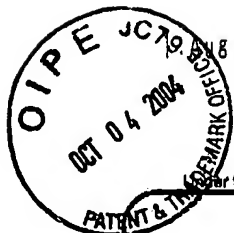
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.



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Aug. 2004 18:02

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No.0256 P. 5

PTO/SB/81 (08-04)

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Filing Date	03/19/2004
First Named Inventor	Robert Harris
Title	IMMUNOMODULATION BY A...
Art Unit	
Examiner Name	
Attorney Docket Number	DIA1809-005B

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☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98)**SIGNATURE of Applicant or Assignee of Record** (if assignee, put name, title and company name in the "Name" space below)

Name	John Robertson		
Signature			
Date	28 Aug 2004	Telephone	46-8-6610026

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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PTO/SB/61 (06-04)

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First Named Inventor	Robert Harris
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Attorney Docket Number	DIA1809-005B

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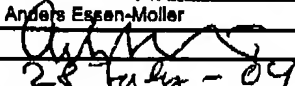
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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/66)**SIGNATURE of Applicant or Assignee of Record (If assignee, put name, title and company name in the "Name" space below)**

Name	Anders Essen-Moller
Signature	
Date	28 July - 04
Telephone	46-8-661 8026

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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